# STATEMENT OF ECONOMIC INTERESTS

NAM	E	I I	Candidate fo	
-	Veronia Nolan	2	_YES	_NO
1	OOR SOUGHT (Ity of Algraphic School Board			
AGEN	NCY/BUSINESS NAME PHONE	and the second s		
1.055	N/A 703-67/-2	720		***************************************
AGEN	NCY/BUSINESS ADDRESS			
CITY	of Summers Ct. STATE	ZIP		
P	tle yandna VA	22301		
NAM	ES OF MEMBERS OF IMMEDIATE FAMILY			
	erean El-Alarty and Ador El-Alarty (son)			
Retu	MPLETE ITEMS 1 THROUGH 10. REFER TO SCHEDULES ONLY IF DIRECTED. rn Schedules only if needed to complete Statement.			
You		REGISTRAT ORAL BOA		<del></del> 1
1.	Offices and Directorships.  Are you or a member of your immediate family a paid officer or paid director of a business?	And a second	YES	NO
	If yes, complete Schedule A			
2.	Personal Liabilities.  Do you or a member of your immediate family owe more than \$5,000 to any one creditor including contingent liabilities? debts to any government and loans secured by recorded liens on property at least equal in value to the loan.)	(Exclude	□ YES	⊠ NO
	If yes, complete Schedule B			
3.	Securities.  Do you or a member of your immediate family, directly or indirectly, separately or together, own securities valued in \$5,000 invested in one business? Account for mutual funds, limited partnerships and trusts.	excess of	YES	□ NO
	If yes, complete Schedule C			
4.	Payment for Talks, Meetings, and Publications.  During the past—six months did you receive in your capacity as an officer or employee of your agency lodging, tran money, or anything else of value with a combined value exceeding \$200 (i) for a single talk, meeting, or published work of meeting, conference, or event where your attendance at the meeting, conference, or event was designed to (a) educate you relevant to your duties as an officer or employee of your agency or (b) enhance your knowledge and skills relative to you an officer or employee of your agency?	or (ii) for a i on issues	TYES	NO NO
	If yes, complete Schedule D			
5.	Gifts. During the past six months did a business, government, or individual other than a relative or personal friend (i) furnish member of your immediate family with any gift or entertainment at a single event, and the value received exceeded furnish you or a member of your immediate family with gifts or entertainment in any combination and the total value exceeded \$100, and for which you or the member of your immediate family neither paid nor rendered services in Account for entertainment events only if the average value per person attending the event exceeded \$50. Account for all entertainment (except if related to the private profession or occupation of you or the member of your immediate far received such business entertainment) even if unrelated to your official duties.	350 or (ii) e received exchange? I business	YES	NO
	If yes, complete Schedule E			
6.	Salary and Wages.  List each employer that pays you or a member of your immediate family salary or wages in excess of \$5,000 annually.  (Exclude state or local government or advisory agencies.) If no reportable salary or wages, check here			
	Censeo Consulting Group Traniff Washington University			

7.	Business Interests.  Do you or a member of your immediate family, separately or together, operate your own business, or own or control an interest in excess of \$5,000 in a business?	KES	NO
	If yes, complete Schedule F		
8.	Payments for Representation and Other Services.		,
8A.	Did you represent, excluding activity defined as lobbying in § 2.2-419, any businesses before any state governmental agencies, excluding courts or judges, for which you received total compensation during the past six months in excess of \$1,000, excluding compensation for other services to such businesses and representation consisting solely of the filing of mandatory papers and subsequent representation regarding the mandatory papers? (Officers and employees of local governmental and advisory agencies do NOT need to answer this question or complete Schedule G-1.)	YES	NO
	If yes, complete Schedule G-1	2004044	/
8B.	Subject to the same exceptions as in 8A, did persons with whom you have a close financial association (partners, associates or others) represent, excluding activity defined as lobbying in § 2.2-419, any businesses before any state governmental agency for which total compensation was received during the past six months in excess of \$1,000? (Officers and employees of local governmental and advisory agencies do NOT need to answer this question or complete Schedule G-2.)  If yes, complete Schedule G-2	YES	NO NO
8C.	Did you or persons with whom you have a close financial association furnish services to businesses operating in Virginia pursuant to an agreement between you and such businesses, or between persons with whom you have a close financial association and such businesses for which total compensation in excess of \$1,000 was received during the past six months? Services reported under this provision shall not include services involving the representation of businesses that are reported under item 8A or 8B.	YES	NO A
	If yes, complete Schedule G-3		
9.	Real Estate.		
9A.	State Officers and Employees.  Do you or a member of your immediate family hold an interest, including a partnership interest, valued at more than \$5,000 or more in real property (other than your principal residence) for which you have not already listed the full address on Schedule F? Account for real estate held in trust.  If yes, complete Schedule H-1	YES	80
9B.	Local Officers and Employees.	terend	gq 7
713.	Do you or a member of your immediate family hold an interest, including a partnership interest, or option, easement, or land contract, valued at more than \$5,000 in real property (other than your principal residence) for which you have not already listed in the full address on Schedule F? Account for real estate held in trust.  If yes, complete Schedule H-2	YES	NO X
10.	Real Estate Contracts with Governmental Agencies Do you or a member of your immediate family hold an interest valued at more than \$5,000 in real estate, including a corporate, partnership, or trust interest, option, easement, or land contract, which real estate is the subject of a contract, whether pending or completed within the past six months, with a governmental agency? If the real estate contract provides for the leasing of the property to a governmental agency, do you or a member of your immediate family hold an interest in the real estate valued at more than \$1,000? Account for all such contracts whether or not your interest is reported in Schedule F, H-1, or H-2. This requirement to disclose an interest in a lease does not apply to an interest derived through an ownership interest in a business unless the ownership exceeds three percent of the total equity of the business.  If yes, complete Schedule I	YES	NO NO
	Statements of Economic Interests are open for public inspection.		
AFI I swe	FIRMATION BY ALL FILERS.  ar or affirm that the foregoing information is full, true and correct to the best of my knowledge.		
		/ K	

SIGNATURE OF FILER

DATE

# **SCHEDULE A**

OFFICES AND DIRECTORSHIPS								
NAME: Veronica Nolan								
OFFICE OR POSITION HELD OR SO	UGHT: ALPS School Board							
dentify each business of which you or a member of your immediate family is a paid officer or paid director.								
NAME OF BUSINESS	ADDRESS OF BUSINESS	POSITION HELD AND BY WHOM						
Cerseo Consulting Group	1313 H St. NW \$600 Washing In DC 20005	Managing Director; Karcon El-Alaig						
when the second enterpolarization or the second and demonstrate and the second and described the second and described and descri								

# **SCHEDULE B**

### PERSONAL LIABILITIES

NAM	ve: Veronica Molan	on accept when with color soles was separable above more opposition to connect the contribution before the	dermiter kilokolokoki esenyeksenya kecili kasususuk kalenda esenya kecili kasususuk
OFF	ICE OR POSITION HELD OR SOUGHT: ACPS Shool Board		
Do n	Individual creditors:  (State principal business or occupation for each creditor and its name.)  CHECK APPROPRIATE CATEGORIES:  CHECK APPROPRIATE CATEGORIES:  CHECK APPROPRIATE CATEGORIES:  CHECK commodity or other brokerage companies  (State principal business or occupation for each creditor and its name.)  CHECK APPROPRIATE CATEGORIES:  CHECK ONE  S50,001 TO  S50,000 TO  S50,000 S50,000  S50,000  S50,000  S50,000  CHECK ONE  S50,001 TO  S50,000 S50,000  S50,000  S50,000  S50,000  CHECK ONE  S50,001 TO  S50,001 TO  S50,000 S50,000  S50,000  S50,000  CHECK ONE  S50,001 TO  S50,000 S50,000  S5		
1.	My personal debts are as follows:		
	CHECK APPROPRIATE CATEGORIES:	\$5,001 TO	MORE THAN
	Savings institutions Other loan or finance companies Insurance companies Stock, commodity or other brokerage companies Other businesses:		
2. 1	The personal debts of the members of my immediate family are as follows:		
	CHECK APPROPRIATE CATEGORIES:	\$5,001 TO	MORE THAN
	Savings institutions Other loan or finance companies Insurance companies Stock, commodity or other brokerage companies		
	Individual creditors:  (State principal business or occupation for each creditor and its name.)		
		OMMONINALISED .	

## **SCHEDULE C**

SECURITIES

NAME:	leconic-	Nola				
OFFICE OR	v POSITION	HELD OR SO	UGHT:	AR	Schol Boad	ngggyatasa najan syanggan awakan permita nata mata mata hari akan da Aperta hari akka sa Kanlaya permita kan s
"SECURIT	TFS" NC	IIDES etneke	bonds	" mutual funds	"SECURITIES" EXCLUDES certificates	of deposit, money

Identify each business or Virginia governmental entity in which you or a member of your immediate family, directly or indirectly, separately or together, own securities valued in excess of \$5,000. Name each issuer and type of security individually.

market funds, annuity contracts, and insurance policies.

Do not list U.S. Bonds or other government securities not issued by the Commonwealth of Virginia or its authorities, agencies, or local governments. Do not list organizations that do not do business in this Commonwealth, but most major businesses conduct business in Virginia. Account for securities held in trust.

If no reportable securities, check here \_\_\_\_.

limited partnerships, and commodity futures contracts.

NAME OF ISSUER	TYPE OF SECURITY	CHECK ONE		
NAME OF TOOLER	(STOCKS, BONDS, MUTUAL FUNDS, ETC.)	5,001 to 50,000	50,001 to 250,000	More than 250,000
Citigrap	Stocks	Ø		О
Microsoft Corp	Shehs	Ø		
Calaxy Entertainment Group	Sheks			
America Realty Capital Properties	Shely		П	
Numericisk :	Shily	<u> </u>		
Apple Inc	Shehs	B		
Valent Pharmaceuticals Inline	Stock	D		
AIA Cray	Stucks	· Ø	***************************************	
Concordia Healthan Corp	Shehs	. 2		
Google Inc	Stochs	<b>a</b>		
Actavis PLC	Stocks	<b>a</b>		
Level 3 Commandections	Stock	Ø		
Conoco Phillips	Stocks			
Inkl Corp	Stocks	B		Emission 1
America Airlines Group	Stocky	M	And the state of t	

### SCHEDULE C

SECURITIES

NAME: Veronia Nolan				
OFFICE OR POSITION HELD OR SOUGHT:	ACPS Schoo	1 3001	Kadapanakan jaga seperakan kena menganakan pendapan menanakan pendapan kenana andara kenana sa sakara menana s	
"SECURITIES" INCLUDES stocks, bonds, a	mutual funds. "SE	CURITIES" EXC	LUDES certificates of de	posit, money

Identify each business or Virginia governmental entity in which you or a member of your immediate family, directly or indirectly, separately or together, own securities valued in excess of \$5,000. Name each issuer and type of security individually.

market funds, annuity contracts, and insurance policies.

Do not list U.S. Bonds or other government securities not issued by the Commonwealth of Virginia or its authorities, agencies, or local governments. Do not list organizations that do not do business in this Commonwealth, but most major businesses conduct business in Virginia. Account for securities held in trust.

If no reportable securities, check here \_\_\_\_\_.

limited partnerships, and commodity futures contracts.

NAME OF ISSUER	TYPE OF SECURITY		CHECK ONE	
	(STOCKS, BONDS, MUTUAL FUNDS, ETC.)	5,001 to 50,000	50,001 to 250,000	More than 250,000
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## **SCHEDULE D**

#### PAYMENT FOR TALKS, MEETINGS, AND PUBLICATIONS

NAME: Vergia Nola	
OFFICE OR POSITION HELD OR SOUGHT:	ACPS School Board
lodging, transportation, money, or any other thing of	the past six months in your capacity as an officer or employee of your agency value with combined value exceeding \$200 (i) for your presentation of a single work or (ii) for your attendance at a meeting, conference, or event where your

List each source from which you received during the past six months in your capacity as an officer or employee of your agency lodging, transportation, money, or any other thing of value with combined value exceeding \$200 (i) for your presentation of a single talk, participation in one meeting, or publication of a work or (ii) for your attendance at a meeting, conference, or event where your attendance at the meeting, conference, or event was designed to (a) educate you on issues relevant to your duties as an officer or employee of your agency or (b) enhance your knowledge and skills relative to your duties as an officer or employee of your agency. Any lodging, transportation, money, or other thing of value received by an officer or employee that does not satisfy the provisions of clause (i), (ii) (a), or (ii) (b) shall be listed as a gift on Schedule E..

List payments or reimbursements by an advisory or governmental agency only for meetings or travel outside the Commonwealth.

List a payment even if you donated it to charity.

Do not list information about payment if you returned it within 60 days or if you received it from an employer already listed under Item 6 or from a source of income listed on Schedule F.

If no payment must be listed, check here \_\_\_\_\_\_.

PAYER	APPROXIMATE VALUE	CIRCUMSTANCES	TYPE OF PAYMENT (e.g. honoraria, travel reimbursement, etc.)
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### **SCHEDULE E**

**GIFTS** 

NAME: Veronia Nol	يحمائل

# OFFICE OR POSITION HELD OR SOUGHT: Als School Board

List each business, governmental entity, or individual that, during the past six months, (i) furnished you or a member of your immediate family with any gift or entertainment at a single event, and the value received exceeded \$50, or (ii) furnished you or a member of your immediate family with gifts or entertainment in any combination and the total value received exceeded \$100, and for which you or the member of your immediate family neither paid nor rendered services in exchange. List each such gift or event. Do not list entertainment events unless the average value per person attending the event exceeded \$50. Do not list business entertainment related to the private profession or occupation of you or the member of your immediate family who received such business entertainment. Do not list gifts or other things of value given by a relative or personal friend for reasons clearly unrelated to your public position. Do not list campaign contributions publicly reported as required by Chapter 9.3 (§ 24.2-900 et seq.) of Title 24.2 of the Code of Virginia.

NAME OF RECIPIENT	NAME OF BUSINESS, ORGANIZATION, OR INDIVIDUAL	CITY OR COUNTY AND STATE	EXACT GIFT OR EVENT	APPROXIMATE VALUE
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### **SCHEDULE F**

BUSINESS INTERESTS

NAME: Vernice Note		
OFFICE OR POSITION HELD OR SOUGHT:	Acrs	Shad Board

Complete this Schedule for each self-owned or family-owned business (including rental property, a farm, or consulting work), partnership, or corporation in which you or a member of your immediate family, separately or together, own an interest having a value in excess of \$5,000.

If the enterprise is owned or operated under a trade, partnership, or corporate name, list that name; otherwise, merely explain the nature of the enterprise. If rental property is owned or operated under a trade, partnership, or corporate name, list the name only; otherwise give the address of each property. Account for business interests held in trust.

NAME OF BUSINESS, CORPORATION,	CITY OR COUNTY	NATURE OF ENTERPRISE	Gi	ROSS INCO	ME
PARTNERSHIP, FARM; ADDRESS OF RENTAL PROPERTY	AND STATE	(FARMING, LAW, RENTAL PROPERTY, ETC.)	50,000 or less	50,001 to 250,000	More than 250,000
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### **SCHEDULE G-1**

#### PAYMENTS FOR REPRESENTATION BY YOU

NAME: Vania	sa Nola							
OFFICE OR POSITIO	N HELD OR SO	OUGHT: ALPS	Board Member					
excluding any court or i	udge, for which services to sucl	you received total com h businesses and repre	d as lobbying in § 2.2-4 pensation during the past sentation consisting sole y you.	six mon	ths in ex	cess of \$	1,000, ex	ccluding
Identify each business, the state the type, rather than	ne nature of the re name, of the bus	epresentation and the ar siness if you are require	nount received by dollar of d by law not to reveal the	ategory f name of	from each the busin	such bu ess repre	siness. Y sented by	∕ou may ⁄you.
Only STATE officers and	d employees sho	uld complete this Sched	ule. N/A					
NAME OF BUSINESS	TYPE OF BUSINESS	PURPOSE OF REPRESENTATION	NAME OF AGENCY	\$1,001 To \$10,000	AMO \$10,001 To \$50,000	UNT RECI \$50,001 To \$100,000	\$100,001 To	\$250,001 And Over
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If you have received \$250,001 or more from a single business within the reporting period, indicate the amount received, rounded to the nearest \$10,000. Amount Received:								

# **SCHEDULE G-2**

#### PAYMENTS FOR REPRESENTATION BY ASSOCIATES

NAME: Veronia Nola	
OFFICE OR POSITION HELD OR SOUGHT: ALB	Brand Member
List the business(es) that have been represented, excluding activity agency, excluding any court or judge, by persons who are your passociation and who received total compensation in excess of \$1,000 representation consisting solely of the filing of mandatory papers as by your partners, associates or others with whom you have a close for	y defined as lobbying in § 2.2-419, before any state governmental artners, associates or others with whom you have a close financial 000 for such representation during the past six months, excluding and subsequent representation regarding the mandatory papers filed financial association.
Identify such business by type and also name the state government businesses.	
Only STATE officers and employees should complete this Schedule	e. MA
TYPE OF BUSINESS	NAME OF STATE GOVERNMENTAL AGENCY

### **SCHEDULE G-3**

PAYMENTS FOR OTHER SERVICES GENERALLY

NAME: Veronia Nola		magnituju kas kasalanga kestara kanalang kestara kanalang kestara kanalang kestara kasalang kestara kanalang k	
OFFICE OR POSITION HELD OR SOUGHT:	ALPS	School Board	Menber

Indicate below types of businesses that operate in Virginia to which services were furnished by you or persons with whom you have a close financial association pursuant to an agreement between you and such businesses, or between persons with whom you have a close financial association and such businesses and for which total compensation in excess of \$1,000 was received during the past six months. Services reported in this Schedule shall not include services involving the representation of businesses that are reported in Schedule G-1 or G-2.

Identify opposite each category of businesses listed below (i) the type of business, (ii) the type of service rendered and (iii) the value by dollar category of the compensation received for all businesses falling within each category.

NIA

			/ V	11+			
	CHECK IF	TYPE OF				ENSATION	
BUSINESS CATEGORY	SERVICES WERE RENDERED	SERVICE RENDERED	\$1,001 TO \$10,000	\$10,001 TO \$50,000	\$50,001 TO \$100,000	\$100,001 TO \$250,000	\$250,001 AND OVER
Electric Utilities						О	О
Gas Utilities	Contract					O	
Telephone Utilities					О	О	
Water Utilities				口			
Cable Television Companies							
Interstate Transportation Companies						О	
Intrastate Transportation Companies	О						
Oil or Gas Retail Companies	П		О				
Banks					О		
Savings Institutions							
Loan or Finance Companies							
Manufacturing Companies (state type of product, e.g., textile, furniture, etc.)							П
Mining Companies							
Life Insurance Companies	Cont					П	
Casualty Insurance Companies							
Other Insurance Companies				口			
Retail Companies							
Beer, Wine or Liquor Companies or Distributors							
Trade Associations						О	
Professional Associations	and the same of th	Name to the state of the state					
Associations of Public Employees or Officials				П	О	O	
Counties, Cities or Towns							
Labor Organizations							
Other	and the second of						

# **SCHEDULE H-1**

REAL ESTATE—STATE OFFICERS AND EMPLOYEES ONLY

NAME: Veronie- Nola						
OFFICE OR POSITION HELD OR SOU	GHT: ACPS School Board					
List real estate other than your principal residence in which you or a member of your immediate family holds an interest, including a partnership interest, option, easement, or land contract, valued at more than \$5,000. Each parcel shall be listed individually.						
LIST EACH LOCATION (STATE, AND COUNTY OR CITY) WHERE YOU OWN REAL ESTATE.	DESCRIBE THE TYPE OF REAL ESTATE YOU OWN IN EACH LOCATION (BUSINESS, RECREATIONAL, APARTMENT, COMMERCIAL, OPEN LAND, ETC.).	IF THE REAL ESTATE IS OWNED OR RECORDED IN A NAME OTHER THAN YOUR OWN, LIST THAT NAME.				

# **SCHEDULE H-2**

REAL ESTATE—LOCAL OFFICERS AND EMPLOYEES ONLY

NAME: Veronia Nola	
OFFICE OR POSITION HELD OR SOUGHT: ACPS	School Board

List real estate other than your principal residence in which you or a member of your immediate family holds an interest, including a partnership interest or option, easement, or land contract, valued at more than \$5,000. Each parcel shall be listed individually. Also list the names of any co-owners of such property, if applicable.

LIST EACH LOCATION (STATE, AND COUNTY OR CITY) WHERE YOU OWN REAL ESTATE	DESCRIBE THE TYPE OF REAL ESTATE YOU OWN IN EACH LOCATION (BUSINESS, RECREATIONAL, APARTMENT, COMMERCIAL, OPEN LAND, ETC.)	IF THE REAL ESTATE IS OWNED OR RECORDED IN A NAME OTHER THAN YOUR OWN, LIST THAT NAME.	LIST THE NAMES OF ANY CO-OWNERS, IF APPLICABLE
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# **SCHEDULE I**

#### REAL ESTATE CONTRACTS WITH GOVERNMENTAL AGENCIES

NAME: Veronia Nola
OFFICE OR POSITION HELD OR SOUGHT: ACPS School Bond
List all contracts, whether pending or completed within the past six months, with a governmental agency for the sale or exchange of real estate in which you or a member of your immediate family holds an interest, including a corporate, partnership or trust interest, option, easement, or land contract, valued at more than \$10,000. List all contracts with a governmental agency for the lease of real estate in which you or a member of your immediate family holds such an interest valued at more than \$1,000. This requirement to disclose an interest in a lease does not apply to an interest derived through an ownership interest in a business unless the ownership interest exceeds three percent of the total equity of the business.
Local officers and employees report contracts with local agencies.
List your real estate interest and the person or entity, including the type of entity, which is party to the contract. Describe any management role and the percentage ownership interest you or your immediate family member has in the real estate or entity.
List each governmental agency which is party to the contract and indicate the county or city where the real estate is located.
State the annual income from the contract, and the amount, if any, of income you or any immediate family member derives annually from the contract.